

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation)
Against:)
)
RICHARD J. SCHAEFFER, M.D.)
)
)
Physician's & Surgeon's)
Certificate No. G 11390)
)

Respondent.)

MBC File # 16-2008-196084

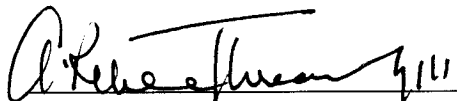
**ORDER CORRECTING CLERICAL ERROR IN
"EFFECTIVE DATE" PORTION OF DECISION**

On its own motion, the Medical Board of California (hereafter "board") finds that there is a clerical error in the "effective date" portion of the Decision in the above-entitled matter and that such clerical error should be corrected so that the effective date will conform to the board's intention.

IT IS HEREBY ORDERED that the effective date contained in the Decision in the above-entitled matter be and hereby is amended and corrected nunc pro tunc as of the date of entry of the decision to read as follows:

"This Decision shall become effective at 5:00 p.m. on May 4, 2009.

IT IS SO ORDERED this 8th day of April 2009.



A. Renee Threadgill
Chief of Enforcement
Medical Board of California

1 EDMUND G. BROWN JR.
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6 Attorneys for Complainant
7

8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

Case No. 16-2008-196084

13 **RICHARD J. SCHAEFFER, M.D.**
14 **8110 East Del Timbre**
15 **Scottsdale, AZ 85258**

DEFAULT DECISION AND ORDER

16 Address of Record

17 Physician's and Surgeon's Certificate
No. G 11390

Respondent.

18 On or about February 9, 2009, an employee of the Medical Board of California
19 (hereinafter "Board"), Arlene Krynski, sent by certified mail a copy of Accusation Case No.
20 16-2008-196084 (hereinafter "Accusation"), Statement to Respondent, Notice of Defense in
21 blank, copies of the relevant sections of the California Administrative Procedure Act as required
22 by sections 11503 and 11505 of the Government Code, and a Request for Discovery, to Richard
23 J. Schaeffer, M.D., (hereinafter "respondent") at his address of record with the Board, 8110 East
24 Del Timbre, Scottsdale, Arizona, 85258. On or about February 17, 2009, the green certified
25 receipt card for the Accusation mailed to respondent's address of record was received by the
26 Board. (A copy of the Accusation, along with a copy of the proof of service, and a copy of the
27 green certified receipt card received by the Board are attached hereto, collectively, as Exhibit 1.)

28 //

1 Respondent has not filed a Notice of Defense. As a result, respondent has waived his
2 right to a hearing on the merits to contest the allegations contained in the Accusation. The Board
3 now proceeds to take action based upon the Accusation, declarations and documentary evidence
4 on file in accordance with Government Code sections 11505(a) and 11520.

5 FINDINGS OF FACT

6 I.

7 Barbara Johnston is the Executive Director of the Medical Board of California and
8 brought the charges and allegations in the Accusation in her official capacity.

9 II.

10 On or about October 20, 1965, Physician's and Surgeon's Certificate No. G 11390 was
11 issued by the Board to Richard J. Schaeffer, M.D. (hereinafter "respondent"). This certificate is
12 renewed and current with an expiration date of September 30, 2010. (A certified copy of
13 respondent's license history is attached hereto as Exhibit 2.)

14 III.

15 On February 9, 2009, an Accusation was filed by the Board alleging causes for
16 discipline against respondent. The Accusation and accompanying documents were duly served
17 on respondent. Respondent failed to file a Notice of Defense.

18 IV.

19 The allegations of the Accusation are true as follows:

20 On or about December 4, 2008, the Arizona Medical Board issued a Consent
21 Agreement for Letter of Reprimand and Probation resulting in the issuance of a Letter of
22 Reprimand and respondent's medical license being placed on one year probation. In addition,
23 respondent was required to complete 15 to 20 hours of Continuing Medical Education (CME) in
24 psychiatry and have Arizona Board staff conduct a chart review following respondent's
25 prescribing and medical record keeping CME courses. The Arizona Medical Board found that
26 respondent committed unprofessional conduct as he prescribed large amounts of controlled
27 substances to three male patients without performing adequate histories and mental status
28 examinations and monitoring, failed to document discussions with these patients of the risks and

1 benefits of prescription medications, failed to maintain adequate medical records for these three
2 patients, and committed conduct that was or could have been harmful/dangerous to the health of
3 these patients. Attached hereto as Exhibit 3 and made a part hereof is a certified copy of the
4 Arizona Medical Board Consent Agreement for Letter of Reprimand and Probation dated
5 December 4, 2008.

6 Pursuant to the foregoing Findings of Fact, respondent's medical license is subject to
7 disciplinary action within the meaning of section 141(a) of the Business and Professions Code
8 and his conduct constitutes unprofessional conduct within the meaning of Business and
9 Professions Code section 2305 and is conduct subject to discipline.

10 DETERMINATION OF ISSUES

11 I.

12 Pursuant to the foregoing Findings of Fact, respondent's conduct constitutes
13 unprofessional conduct within the meaning of Business and Professions Code section 2305 and is
14 conduct subject to discipline within the meaning of section 141(a).

15 DISCIPLINARY ORDER


16 Physician's and Surgeon's Certificate No. G 11390 issued to Richard J. Schaeffer,
17 M.D. is hereby **REVOKED**.

18 Respondent shall not be deprived of making a request for relief from default as set
19 forth in Government Code section 11520(c) for good cause shown. However, such showing
20 must be made in writing by way of a motion to vacate the default decision and directed to the
21 Medical Board of California at 2005 Evergreen Street, Suite 1200, Sacramento, CA 95815
22 within seven (7) days of the service of this Decision.

23 This Decision will be come effective April 10, 2009.

24 DATED: April 3, 2009

25 By


BARBARA JOHNSTON
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

26
27
28 Exhibits 1, 2, and 3

1 EDMUND G. BROWN JR.
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2 JOSE R. GUERRERO, State Bar No. 97276
Supervising Deputy Attorney General
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6 Attorneys for Complainant

7
8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

Case No. 16-2008-196084

13 **RICHARD J. SCHAEFFER, M.D.**
14 **8110 East Del Timbre**
15 **Scottsdale, AZ 85258**

ACCUSATION

16 Address of Record

17 Physician's and Surgeon's Certificate No. G 11390

18 Respondent.

19 The Complainant alleges:

20 **PARTIES**

21 1. Complainant Barbara Johnston is the Executive Director of the Medical Board of
22 California (hereinafter the "Board") and brings this accusation solely in her official capacity.

23 2. On or about October 20, 1965, Physician's and Surgeon's Certificate No. G 11390
24 was issued by the Board to Richard J. Schaeffer, M.D. (hereinafter "respondent"). This
25 certificate is renewed and current with an expiration date of September 30, 2010.

26 **JURISDICTION**

27 3. This accusation is brought before the Medical Board of California, Department of
28 Consumer Affairs, under the authority of the following sections of the California Business and
Professions Code (hereinafter "Code") and/or other relevant statutory enactment:

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1 A. Section 2227 of the Code provides in part that the Board^{1/} may revoke, suspend
2 for a period of not to exceed one year, or place on probation, the license of any licensee who
3 has been found guilty under the Medical Practice Act, and may recover the costs of
4 probation monitoring if probation is imposed.

5 B. Section 2305 of the Code provides, in part, that the revocation, suspension, or
6 other discipline, restriction or limitation imposed by another state upon a license to practice
7 medicine issued by that state, that would have been grounds for discipline in California
8 under the Medical Practice Act, constitutes grounds for discipline for unprofessional
9 conduct.

10 C. Section 141 of the Code provides:

11 "(a) For any licensee holding a license issued by a board under the jurisdiction of
12 a department, a disciplinary action taken by another state, by any agency of
13 the federal government, or by another country for any act substantially related to the
14 practice regulated by the California license, may be a ground for disciplinary action by the
15 respective state licensing board. A certified copy of the record of the disciplinary action
16 taken against the licensee by another state, an agency of the federal government, or by
17 another country shall be conclusive evidence of the events related therein."

18 "(b) Nothing in this section shall preclude a board from applying a specific
19 statutory provision in the licensing act administered by the board that provides for discipline
20 based upon a disciplinary action taken against the licensee by another state, an agency of the
21 federal government, or another country."

22 4. Respondent is subject to discipline within the meaning of section 2305 and/or
23 section 141 of the Code as more particularly set forth herein below.

24 //

25 //

26
27 1. Cal. Bus. & Prof. Code section 2002, as amended and effective January 1, 2008, provides
28 that, unless otherwise expressly provided, the term "board" as used in the State Medical
Practice Act (Cal. Bus. & Prof. Code, sections 2000, et seq.) means the "Medical Board of
California," and references to the "Division of Medical Quality" and "Division of Licensing" in
the Act or any other provision of law shall be deemed to refer to the Board.

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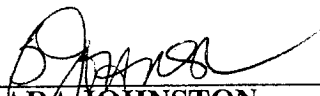
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1 3. Revoking, suspending or denying approval of the respondent's authority to
2 supervise physician assistants; and,

3 4. Taking such other and further action as deemed necessary and proper.

4 DATED: February 9, 2009.

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7 **BARBARA JOHNSTON**
8 Executive Director
9 Medical Board of California
10 Department of Consumer Affairs
11 State of California

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Exhibit A: Arizona Medical Board Consent Agreement For Letter of Reprimand and Probation

EXHIBIT A

BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of

RICHARD J. SCHAEFFER, M.D.

License No. 4736
For the Practice of Allopathic Medicine
In the State of Arizona.

Case No. MD-07-0541A

**CONSENT AGREEMENT FOR
LETTER OF REPRIMAND AND
PROBATION**

CONSENT AGREEMENT

By mutual agreement and understanding, between the Arizona Medical Board ("Board") and Richard J. Schaeffer, M.D. ("Respondent"), the parties agreed to the following disposition of this matter.

1. Respondent has read and understands this Consent Agreement and the stipulated Findings of Fact, Conclusions of Law and Order ("Consent Agreement"). Respondent acknowledges he has the right to consult with legal counsel regarding this matter.

2. By entering into this Consent Agreement, Respondent voluntarily relinquishes any rights to a hearing or judicial review in state or federal court on the matters alleged, or to challenge this Consent Agreement in its entirety as issued by the Board, and waives any other cause of action related thereto or arising from said Consent Agreement.

3. This Consent Agreement is not effective until approved by the Board and signed by its Executive Director.

4. The Board may adopt this Consent Agreement or any part thereof. This Consent Agreement, or any part thereof, may be considered in any future disciplinary action against Respondent.

5. This Consent Agreement does not constitute a dismissal or resolution of other matters currently pending before the Board, if any, and does not constitute any

1 waiver, express or implied, of the Board's statutory authority or jurisdiction regarding any
2 other pending or future investigation, action or proceeding. The acceptance of this
3 Consent Agreement does not preclude any other agency, subdivision or officer of this
4 State from instituting other civil or criminal proceedings with respect to the conduct that is
5 the subject of this Consent Agreement.

6 6. All admissions made by Respondent are solely for final disposition of this
7 matter and any subsequent related administrative proceedings or civil litigation involving
8 the Board and Respondent. Therefore, said admissions by Respondent are not intended
9 or made for any other use, such as in the context of another state or federal government
10 regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or
11 any other state or federal court.

12 7. Upon signing this agreement, and returning this document (or a copy thereof)
13 to the Board's Executive Director, Respondent may not revoke the acceptance of the
14 Consent Agreement. Respondent may not make any modifications to the document. Any
15 modifications to this original document are ineffective and void unless mutually approved
16 by the parties.

17 8. If the Board does not adopt this Consent Agreement, Respondent will not
18 assert as a defense that the Board's consideration of this Consent Agreement constitutes
19 bias, prejudice, prejudgment or other similar defense.

20 9. This Consent Agreement, once approved and signed, is a public record that
21 will be publicly disseminated as a formal action of the Board and will be reported to the
22 National Practitioner Data Bank and to the Arizona Medical Board's website.

23 10. If any part of the Consent Agreement is later declared void or otherwise
24 unenforceable, the remainder of the Consent Agreement in its entirety shall remain in force
25 and effect.

1 11 Any violation of this Consent Agreement constitutes unprofessional conduct
2 and may result in disciplinary action. A.R.S. § § 32-1401(27)(r) ("violating a formal order,
3 probation, consent agreement or stipulation issued or entered into by the board or its
4 executive director under this chapter") and 32-1451.

5 12 Respondent has read and understands the condition(s) of probation.
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7

8 Richard J. Schaeffer MD DATED: 10/21/28
9 RICHARD J. SCHAEFFER, M.D.

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FINDINGS OF FACT

1. The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.

2. Respondent is the holder of license number 4736 for the practice of allopathic medicine in the State of Arizona.

3. The Board initiated case number MD-07-0511A after receiving a complaint regarding Respondent's care and treatment of a thirty-four year-old male patient ("BC").

4. From January 3, 2006 through June 17, 2007, BC saw Respondent for psychiatric care and reported a history of depression, high energy episodes, alcohol, cocaine and heroine abuse. BC also reported that he was being treated at a Methadone clinic for substance abuse. Respondent did not document that he obtained an adequate history of BC's substance abuse and mental status examination during several office visits. Respondent diagnosed BC with bipolar and attention deficit hyperactivity disorder (ADHD).

5. During several visits, Respondent prescribed large amounts of medications, including controlled substances such as Seroquel, Lorazepam, Adderall, Valium, and Klonopin. There was inadequate documentation that Respondent monitored or followed up with BC while he was taking the medications; that Respondent discussed the side effects, risks, and benefits of the medications prior to prescribing them; and that Respondent tracked the amount of refills he prescribed.

6. Additionally, on two occasions BC's wife contacted Respondent regarding BC's potential domestic violence and ongoing substance abuse. Respondent did not respond to BC's wife.

7. Following an investigational interview with Respondent, Board Staff randomly selected three patient records from his office for review and found deviations in two of the records, patients PM and TT. Board Staff noted that Respondent provided several

1 prescriptions for controlled substances to PM and TT without documenting an adequate
2 history of substance abuse and mental status examination. There also was inadequate
3 documentation that Respondent discussed side effects, risks, and benefits of the
4 medications with PM and TT.

5 8. On December 27, 2007, a twenty-seven year-old male patient ("PM")
6 presented to Respondent's office and was diagnosed with ADHD and consideration of
7 mood disorder. Respondent prescribed Dextrostat 5-10 mg twice a day for ADHD. In
8 March 2006, Respondent increased the dosage to 20mg twice a day without any
9 indication. Subsequently, Respondent prescribed brief trials of antipsychotic medications
10 that included Risperdal and Abilify with no noted change in his diagnosis or for why the
11 medications were added. The trials were for a short length of time and there was no
12 indication as to why Respondent discontinued the medications. In June and September of
13 2007, Respondent prescribed PM Dextrostat 20 mg, Ritalin 10 mg and Wellbutrin twice a
14 day without any documentation of indication.

15 9. On September 11, 2007, a thirty-one year-old male patient ("TT") presented
16 to Respondent with a primary diagnosis of bipolar disorder, not otherwise specified and a
17 secondary diagnosis of personality disorder. Respondent recommended Abilify and wrote
18 prescriptions for it. Respondent also prescribed Lithium; however, there was no mention of
19 this medication in Respondent's evaluation notes. Additionally, the Abilify prescription did
20 not have refills, but refills were allowed for the Lithium. Respondent did not initially order
21 laboratory tests, such as a complete blood count, complete metabolic panel, thyroid panel,
22 electrocardiogram; he did not coordinate care with TT's primary care physician and he did
23 not obtain follow up Lithium levels.

24 10. On February 22, 2008, Respondent was ordered to undergo an evaluation
25 that concluded Respondent demonstrated solid, but outdated fund of knowledge in

1 psychiatry and a lack of familiarity with DSM-IV criteria. It was recommended that
2 Respondent participate or attend a course to update his fund of knowledge in psychiatry
3 and a recordkeeping course to address the deficiencies in his documentation.

4 11. The standard of care requires a physician to conduct a complete history,
5 mental status examination, and substance abuse history.

6 12. Respondent deviated from the standard of care because he did not obtain an
7 adequate history of BC, PM, and TT.

8 13. The standard of care requires a physician to prescribe minimum amounts of
9 necessary controlled substances with adequate follow up and monitoring.

10 14. Respondent deviated from the standard of care because he prescribed large
11 amounts of controlled substances to BC without documentation regarding adequate follow
12 up and monitoring.

13 15. The standard of care requires a physician to discuss side effects, risks, and
14 benefits of medications prescribed to a patient.

15 16. Respondent deviated from the standard of care because he did not
16 adequately document his discussion regarding the side effects, risks, and benefits of the
17 medication prescribed with BC, PM, and TT.

18 17. The standard of care requires a physician to perform a standard workup for
19 Lithium and obtain a follow up Lithium level.

20 18. Respondent deviated from the standard of care because he did not initially
21 order laboratory tests and he did not obtain a follow up Lithium level for TT.

22 19. BC was hospitalized, arrested, and had ongoing incidents of domestic
23 violence that were related to his ongoing substance abuse that was not recognized by
24 Respondent. Additionally, BC potentially could have suffered an accident or overdose with
25 a possible occurrence of a psychotic episode. The amount of controlled substances

1 prescribed to PM without adequate documentation of substance abuse created a concern
2 of community safety. If TT had unknown reduced renal function or a pre-existing
3 arrhythmia, there was the potential for a serious adverse drug reaction..

4 20. A physician is required to maintain adequate legible medical records
5 containing, at a minimum, sufficient information to identify the patient, support the
6 diagnosis, justify the treatment, accurately document the results, indicate advice and
7 cautionary warnings provided to the patient and provide sufficient information for another
8 practitioner to assume continuity of the patient's care at any point in the course of
9 treatment. A.R.S. § 32-1401(2). Respondent's records were inadequate because he did
10 not obtain an adequate history and mental status examination; he did not document the
11 side effects, risks, and benefits of medications prescribed; and he prescribed large
12 amounts of medications without documented indication.

13 21. In mitigation, Dr. Schaeffer has completed 70 category I credits in psychiatry
14 and the University of California San Diego Medical Recordkeeping course, for another
15 17.25 category I credits.

16 CONCLUSIONS OF LAW

17 1. The Board possesses jurisdiction over the subject matter hereof and over
18 Respondent

19 2. The conduct and circumstances described above constitute unprofessional
20 conduct pursuant to A.R.S. § 32-1401(27)(e) ("failing or refusing to maintain adequate
21 records on a patient.") and A.R.S. § 32-1401(27)(q) ("[a]ny conduct or practice that is or
22 might be harmful or dangerous to the health of the patient or the public.").

23 ORDER

24 IT IS HEREBY ORDERED THAT:
25

1 1. Respondent is issued a Letter of Reprimand for prescribing large amounts of
2 controlled substances without performing an adequate history and mental status
3 examination and monitoring; for failure to document discussion of risks and benefits of
4 prescription medication; and for failure to maintain adequate records.

5 2. Respondent is placed on probation for one year with the following terms and
6 conditions:

7 a. Continuing Medical Education

8 Respondent shall within six months of the effective date of this Order obtain
9 15 - 20 hours of Board Staff pre-approved Category I Continuing Medical Education
10 (CME) in psychiatry. Respondent shall provide Board Staff with satisfactory proof of
11 attendance. The CME hours shall be in addition to the hours required for the biennial
12 renewal of medical license.

13 b. Chart Reviews

14 Board Staff or its agent shall conduct a chart review following Respondent's
15 completion of the prescribing and medical recordkeeping CME. Based upon the chart
16 review, the Board retains jurisdiction to take additional disciplinary or remedial action.

17 c. Obey All Laws

18 Respondent shall obey all state, federal and local laws, all rules governing
19 the practice of medicine in Arizona, and remain in full compliance with any court ordered
20 criminal probation, payments and other orders.

21 d. Tolling

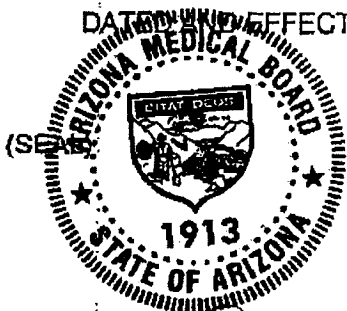
22 In the event Respondent should leave Arizona to reside or practice outside
23 the State or for any reason should Respondent stop practicing medicine in Arizona,
24 Respondent shall notify the Executive Director in writing within ten days of departure and
25 return or the dates of non-practice within Arizona. Non-practice is defined as any period of

1 time exceeding thirty days during which Respondent is not engaging in the practice of
2 medicine. Periods of temporary or permanent residence or practice outside Arizona or of
3 non-practice within Arizona, will not apply to the reduction of the probationary period.

4 e. Respondent's probation shall terminate upon successful completion of
5 the CME courses and satisfactory chart reviews.

6 3. This Order is the final disposition of case number MD-07-0541A.

7 DATED AND EFFECTIVE this 4th day of December, 2008.



ARIZONA MEDICAL BOARD

10

11 By Lisa S. Wynn

Lisa S. Wynn
Executive Director

12 ORIGINAL of the foregoing filed
13 this 4th day of December, 2008 with:

14 Arizona Medical Board
9545 E. Doubletree Ranch Road
15 Scottsdale, AZ 85258

16 EXECUTED COPY of the foregoing mailed
17 this 4th day of December, 2008 to:

18 Paul Giancola
Snell & Wilmer
19 400 East Van Buren
Phoenix, Arizona 85004-2202

20 EXECUTED COPY of the foregoing mailed
21 this 4th day of December, 2008 to:

22 Richard J. Schaeffer, M.D.
23 Address of Record

24 Chris Rump
25 Investigational Review